DISCLOSURE **DISCLOSURE SUMMARY PAGE** (Rev. 01/98) REPORT **(1)** For Office Use Only IA ETHICS AND COMMITTEE NAME (Must be same as on Statement of Organization) CALHOUN COUNTY DEMOCRATIC CENTRAL COMMITTEE Comm. # _____ Indexed ___ 2008 JUL 10 AM 9: 14 Audited IMPORTANT: Indicate type of committee you are reporting for: PM 7.9.08 Computer (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates 712-297-8746 July 8, 2008 REASURER (or person filing this report) **TELEPHONE** DATE SIGNED Routine Penalties Due For Late Filed Reports Range from \$20 to \$800 SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A May 15 - July 14 REPORT FOR ANA (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate one 1 ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election County & Local Committees, enter County in ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. which Election is held (You must continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, ADD TOTAL MONEY TAKEN IN THIS PERIOD 40.00 Schedule A: Cash Contributions total (Attach Schedule A) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL.....\$ 2,1174.36 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) 595.99 Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report, balance must UNPAID BILLS (From Schedule D - Attach Schedule D)\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

DR-2

____ YES ____ NO

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)					
CALHOUN	COUNTY	DEMOCRATIC	CENTRAL	COMMITTEE	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5/15/08	ID# CK#	4th District Democratic Central Committee; Don Ruby St. Charles, IA	Delegate rebate	\$ 40.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#	•••			
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	ID#	· · · · · · · · · · · · · · · · · · ·			·
	ID#				
		· · · · · · · · · · · · · · · · · · ·	SUB-TOTAL		

SUB-TOTAL \$40.00

TOTAL (if last page of this schedule) \$40.00

Page 1 of 1 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF ENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

CALHOUN COUNTY DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6/26/08	ID# CK#	Becky Greenwald for Congress, PO Box 608 Perry, IA	Donation for Campaign	_{\$} 500.00
7/1/08	ID# CK#	Treasurer-State of IA Ia. Dept Inspections & Appeals, Des Moines	Raffle permit 14 day	15.00
7/6/08	ID# CK#	Parkside Flowers 108 4th St. Rockwell City, IA	Plant for Bill Haberstroh Funeral- long time Democrat	34.98
7/6/08	ID# CK#	Bauman's Jewelry 105 E. Main Lake City, IA	Charm necklace for retired Chairperson Carol Hood	46.01
	ID# CK#			Į.
	ID# CK#			
	ID# CK#			
	ID#			
			SUB-TOTAL	\$595 . 99
			TOTAL (if last page of this schedule)	\$595.99

4595.99

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

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